FEC FORM

## STATEMENT OF ORGANIZATION

RECEIVED 7
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FEC MAIL CENTER

FORM 1					FEC MAIL CENTER	
NAME OF COMMITTEE (in	n full)-	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	Seneral second	
Ann PAC	٠				1	
	<u> </u>			<u> </u>		
		P.O. Box 3535				
ADDRESS (number a		1 1 1 1 1 1 1	<u> </u>	1 1 1 1 1 1		
(Check if address is changed)		Ballwin MO 63022				
			CITY	STATE	ZIP CODE	
COMMITTEE'S E-MA  (Check if is change	address	(Please provide only one lkleffner1@gmail.co	m 1			
COMMITTEE'S WEE	PAGE ADDR	and the state of t	in the first transport of the second of the	***************************************		
(Check if is change						
2. DATE 1	0 01	2012		eksembol kalance e	in the transfer of the control of the con-	
3. FEC IDENTIFIC	CATION NUM	BER C		,		
4. IS THIS STATE	MENT	NEW (N) OR	AMENDED (A)			
I certify that I have	examined this	Statement and to the be	est of my knowledge and belief	it is true, correct	and complete.	
Type or Print Name	of Treasurer	Patrick McSwain				
Signature of Treasur	Patrick Mo er	:Swain	· · · · · ·	Date	, 000, , , , , , , , , , , , , , , , ,	
NOTE: Submission of			on may subject the person signing		the penalties of 2 U.S.C. §437g.	
Office Use			For further information Federal Election Commis Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)	

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	F COMMITTEE						
r	late Commisse:						
(a) [	This committee is a principal campaign committee. (Complete the candidate information bel	ow.)					
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)						
Name of Candidat	•						
Candidat Party Aff		State t District					
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee						
Name of Candidat							
Party (	Committee:	/Domogratic					
(d)	(National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party					
Politica	al Action Committee (PAC):						
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its	connected organization is					
	Corporation Corporation w/o Capital Stock	Labor Organization					
	Membership Organization Trade Association	Cooperative					
	In addition, this committee is a Lobbyist/Registrant PAC.	٠.					
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate committee. (i.e., nonconnected committee)	e segregated fund or part					
	In addition, this committee is a Lebbyist/Registrant PAC.						
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)						
Joint Fu	undraising Representative:						
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for committees/organizations, at least one of which is an authorized committee of a federal candidate.						
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds to committees/organizations, none of which is an authorized committee of a federal candidate.	or two or more political					
C	committees Participating in Joint Fundraiser						
1	.						
2	.						
3	FEC ID number C						
4							

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Write or Type Committee Na	me .	
Ann PAC		
6. Name of Any Connected	d Organization, Affiliated Committee, Joint Fundraising Representative, or Lea	dership PAC Sponsor
ANN L WAGNER	<u> </u>	
Mailing Addross	313 ST ANDREWS COURT	
Mailing Address		
	BALLWIN MO 630	11
	CITY STATE	ZIP CODE
	3IAIL	
Relationship: Connec	cted Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
<ol> <li>Custodian of Records: le books and records.</li> </ol>	dentify by name, address (phone number optional) and position of the person in	n possession of committee
Laura K	Cleffner	
Full Name	,14384 Spyglass Ridge	
Mailing Address	<u> </u>	
	NO 620	117
	Chesterfield MO 630	·//
Title or Position	CITY STATE	ZIP CODE
Assistant Treasurer	Telephone number	-   7385
B. Treasurer: List the name any designated agent (e.g.	and address (phone number optional) of the treasurer of the committee; and the assistant treasurer).	ne name and address of
Full Name Patrick	McSwain .	
of Treasurer		
Mailing Address	11 Devon Read	
	St. Louis MO 631	22
Title or Profiter	CITY STATE	ZIP CODE
Title or Position Treasurer	703 Telephone number	- <del>850</del> - <del>7476</del>
•		

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Full Name of Designated Laura Klef Agent Laura Klef	fner						
Mailing Address	14384 Spyglass Ridge						
	Chesterfield CITY	MO 63017 STATE	ZIP CODE				
Title or Position Assistant Treasurer	Telephone nun	nber 314	576 - 7385				
Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.  Name of Bank, Depository, etc.  Commerce Bank/Commerce Bankshares, Inc.  14317 Manchester Road  Mailing Address							
	Ballwin	MO 63011					
	CITY	STATE	ZIP CODE				
Name of Bank, Depository, e	etc.						
	<u> </u>						
Mailing Address		11111					
<u> </u>	CITY	STATE	ZIP CODE				

## **Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS** The FEC added this page to the end of this filing to indicate how it was received. Date of Receipt **Hand Delivered Postmarked USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified **Postmarked USPS Priority Mail** Delivery Confirmation<sup>™</sup> or Signature Confirmation<sup>™</sup> Label **Postmarked USPS Express Mail** Postmark Illegible No Postmark **Shipping Date Overnight Delivery Service (Specify): Next Business Day Delivery Date of Receipt** Received from House Records & Registration Office **Date of Receipt** Received from Senate Public Records Office **Date of Receipt** Received from Electronic Filing Office **Date of Receipt or Postmarked** Other (Specify): DATE PREPARED